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EXAMINING GROUP 2676
PATENT
Customer No. 42304
Attorney Docket No. 08831.0060
Confirmation No. 9772

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Michael Francis Higgins) Group Art Unit: 2676
Application No.: 10/690,716) Examiner: Luu, Matthew
Filed: October 21, 2003)
For: GAMUT CONVERSION SYSTEM)
AND METHODS)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate of Transmission	
I hereby certify that this correspondence is being transmitted by facsimile to the USPTO on the following date: December 13, 2005	
<u>Carolyn Marsden</u> Printed Name	 Signature

Sir:

AMENDMENT UNDER 37 CFR 1.111

Applicant files herewith an Amendment in response to an Office Action mailed June 13, 2005. Applicant respectfully submits that the application now stands in condition for allowance and the same is respectfully requested.

Amendments to the Specification begin on page 3.

Amendments to the Claims begin on page 10.

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PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0002

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the President's Executive Order of 1995, no person is required to furnish information unless it contains a valid OMB control number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2003 (P.L.R. 4818).

FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1200.00

Complete if Known

Application Number 10/690,716
Filing Date October 21, 2003
First Named Inventor HIGGINS, Michael Francis
Examiner Name LUU, Matthew
Art Unit 2676
Attorney Docket No. 08831.0050

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):☐ Deposit Account Deposit Account Number: Deposit Account Name:

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims Extra Claims Fee (\$)

- 20 or HP = x =

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$)

- 3 or HP = x =

HP = highest number of independent claims paid for, if greater than 2.

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fees Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = / 50 = (round up to a whole number) x = Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Extension of Time-3 months and IDS Fee

\$1020.00

SUBMITTED BY

Signature *Stuart P. Kater* Registration No. 35,813 Telephone 707-824-2487
Name (Print/Type): Stuart P. Kater Date December 13, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



S.H. MICHAEL KIM
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October 21, 2003

ATTORNEY DOCKET NO. 8831.0060
CUSTOMER NO. 22,852

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

New U.S. Patent Application
Title: GAMUT CONVERSION SYSTEM AND METHODS
Inventor: Michael Francis Higgins

Sir:

We enclose the following papers for filing in the United States Patent and Trademark Office in connection with the above patent application.

1. Application - 26 pages, including one title page (not numbered), specification (18 pages, pages 1-18), claims (6 pages, pages 19-24), and one Abstract page (page 25) 5 independent claims and 32 claims total.
2. Drawings - 6 sheets of drawings (Figures 1, 2A, 2B, 2C, 3, 4A, 4B, 4C, 5, 6, 7, and 8).
3. The filing fee is calculated as follows:

Basic Application Filing Fee					\$770	\$ 770.00
	Number of Claims		Basic	Extra Claims		
Total Claims	32	-	20	12	x \$18	\$ 216.00
Independent Claims	5	-	3	2	x \$86	\$ 172.00
<input type="checkbox"/> Presentation of Multiple Dep. Claim(s)					+\$290	
Subtotal						\$ 1,158.00
Reduction by 1/2 if small entity						-
TOTAL APPLICATION FILING FEE						\$ 1,158.00

4. Please charge \$1,158.00 to Deposit Account No. 06-0916. The fee includes:
\$770.00 filing fee; and
\$388.00 additional claims fee.

Please address all correspondence with respect to this application to:

Finnegan, Henderson, Farabow,
Garrett & Dunner, L.L.P.
1300 I Street, N.W.
Washington, D.C. 20005-3315

This application will be completed in accordance with 37 C.F.R. § 1.53(f) upon receiving a Notice to File Missing Parts of Application.

Please accord this application an application number and filing date.

The Commissioner is hereby authorized to charge any additional fees due and any other fees under 37 C.F.R. § 1.16 or § 1.17 during the pendency of this application to our Deposit Account No. 06-0916.

Respectfully submitted,

FINNEGAN, HENDERSON, FARABOW,
GARRETT & DUNNER, L.L.P.

By: Sang Hui Kim
Sang Hui Michael Kim
Reg. No. 40,450

SHK/lp

Enclosures

CERTIFICATE OF EXPRESS MAILING	
Express Mail Label No.: EV 351293881 US	
I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10, addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.	
Date: <u>October 21, 2003</u>	Signed: <u>Linda Phillips</u> Linda Phillips

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/690716

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	12/19/06		
Total	* 35	Minus ** 32	= 3
Independent	* 6	Minus *** 5	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

Fee paid in full

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	150.00
X\$ 25=	
X100=	
+180=	
TOTAL	

RATE	FEE
BASIC FEE	300.00
X\$50=	
X200=	
+360=	
TOTAL	

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 25=	
X100=	
+180=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$50=	150
X200=	200
+360=	
TOTAL ADDIT. FEE	350

RATE	ADDITIONAL FEE
X\$ 25=	
X100=	
+180=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$50=	
X200=	
+360=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 25=	
X100=	
+180=	

RATE	ADDITIONAL FEE
X\$50=	
X200=	
+360=	